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Bib Data Sheet

CONFIRMATION NO. 1945

<b>SERIAL NUMBER</b> 10/062,400	<b>FILING OR 371(c) DATE</b> 02/01/2002 <b>RULE</b>	<b>CLASS</b> 726	<b>GROUP ART UNIT</b> 2439	<b>ATTORNEY DOCKET NO.</b> ECD-0004
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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/349,075 01/16/2002  
 and claims benefit of 60/340,506 12/14/2001  
 and claims benefit of 60/313,952 08/21/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 02/26/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MI	SHEETS DRAWING 10	TOTAL CLAIMS 110	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature _____ Initials _____					

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**TITLE**

SYSTEMS AND METHODS FOR MEDIA AUTHENTICATION

<b>FILING FEE RECEIVED</b> 2490	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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